

Wellness Notes

Parkinson's Disease*

(Part IV)

- **Symptoms and Diagnosis (Part 2)**

Rigidity, or a resistance to movement, affects most people with Parkinson's. It becomes obvious when another person tries to move the individual's arm, such as during a neurological examination. The arm will move only in ratchet-like or short, jerky movements known as "cogwheel" rigidity.

Bradykinesia, or the slowing down and loss of spontaneous and automatic movement, is particularly frustrating because it may make simple tasks somewhat difficult. Activities once performed quickly and easily, such as washing or dressing, may take several hours. Postural instability, or impaired balance, causes people with Parkinson's to fall easily. They also may develop a stooped posture with a bowed head and droopy shoulders.

A number of other symptoms may accompany Parkinson's disease. Some are minor; others are not. Many can be treated with medication or physical therapy. No one can predict which symptoms will affect an individual person, and the intensity of the symptoms varies from person to person. Many people note that prior to experiencing motor problems of stiffness and tremor, they had symptoms of a sleep disorder, constipation, decreased ability to smell, and restless legs.

Other symptoms include depression, emotional changes, difficulty swallowing and chewing, speech changes, urinary problems or constipation, skin problems, sleep problems, dementia or other cognitive problems, orthostatic hypotension (a sudden drop in blood pressure when standing up from a sitting or lying down position), muscle cramps and dystonia (twisting and repetitive movements), pain, fatigue and loss of energy, and sexual dysfunction.

There are currently no imaging, blood, or laboratory tests to diagnose sporadic Parkinson's disease. Diagnosis is based on a person's medical history and a neurological examination, but the disease can be difficult to diagnose accurately. Early signs and symptoms of Parkinson's may sometimes be dismissed as the effects of normal aging. A doctor may need to observe the person for some time until it is clear that the symptoms are consistently present. Improvement after initiating medication is another important hallmark of Parkinson's disease.

Doctors may sometimes request brain scans or laboratory tests to rule out other diseases. However, computed tomography (CT) and magnetic resonance imaging (MRI) brain scans of people with Parkinson's usually appear normal. Since many other diseases have similar features but require different treatments, it is very important to make an exact diagnosis as soon as possible to ensure proper treatment.